

# EMOTIONAL HEALTH GUIDELINES

UNIVERSITY OF NEBRASKA MEDICAL CENTER  
COLLEGE OF NURSING

**Emotional Health Guidelines** Subsection: **Appendix I**  
Section - Appendices Originating Date: February 2008  
Responsible Reviewing Agency: Reviewed: November 2012  
Executive Council Revised: April 2015

Related Documents:  
5.1.4 Emotional Health Policy and Guidelines

## GUIDELINES:

- I. VOLUNTARY STUDENT COUNSELING SERVICES.  
Students with psychological, emotional, or behavioral problem(s) are encouraged to seek voluntary assistance through Student Counseling Services or other appropriate counseling services.
- II. MANDATORY STUDENT COUNSELING SERVICES.

- A. Students may be identified for MANDATORY referral to Student Counseling Services. A mandatory referral will be initiated only after the involved faculty member and respective Program Director (BSN, MSN, DNP, PhD) or the designated Assistant Dean have (1) discussed the observed behaviors with the student; (2) provided the student with the opportunity to respond; and (3) made a determination that a mandatory referral is required. Students exhibiting the following behaviors will be considered for **MANDATORY** referral:
1. Clinical or academic performance that suggests the student is experiencing psychological, emotional, or behavioral problem(s).
  2. Disciplinary problems, which suggest the student is experiencing psychological, emotional, or behavioral problem(s) that interfere with the student's ability to complete the course of study.
  3. Behaviors that disrupt the educational process for the student or others.
  4. Behaviors that endanger the well-being of the student or others.

**B.** Faculty awareness of student behaviors outlined in paragraph A above shall be reported as soon as possible to:

- the appropriate Program Director, who will inform the Associate Dean for Academic programs
- the Division Assistant Dean.

**C.** When faculty members become aware of behaviors that impair academic or clinical performance (listed in paragraph A), they should document the performance or behaviors in anecdotal notes (academic) or the student's clinical evaluation record (clinical). These notes will be stored safely in the appropriate Program Director and Division Assistant Dean's offices with only authorized person having access to the records.

**D.** When a student is posing an immediate danger to self or others, the faculty member/administrator may follow the guidelines outlined below:

1. REMOVE the student from the academic or clinical setting as quietly as possible.
2. INFORM the student of the behaviors observed and that he/she will not be allowed to remain on the premises due to these behaviors.
3. REFER the student to Student Health (or the appropriate Emergency Department) for appropriate evaluation and testing and inform the physician on duty of the behaviors exhibited by the student.
4. DOCUMENT the incident and actions taken as soon as possible after the incident following the procedure in II.C.
5. REFUSAL TO COMPLY. If the student who poses an immediate threat to self or others refuses to comply with the college official's requests, appropriate action should be taken to protect the student and others from harm. Security officers or local police may be called if needed.

E. The appropriate Program Director and/or Division Assistant Dean and involved faculty member may initiate contract agreements to facilitate the student's referral to counseling services for mental health assessment, treatment, and aftercare. Written contracts should state reasons for referral and any additional conditions students must satisfy. Failure to comply with contract requirements may result in academic dismissal.

F. The College records, including any releases and contracts, related to the mandatory referral shall be kept in a separate confidential file in a safe location in the appropriate Program Director and Division Assistant Dean's offices with only authorized persons having access to the records. The records will be kept while the student is in his/her academic program. Only official reports of academic or disciplinary proceedings, if any, will be kept in the student's permanent academic record. Specific releases and records of the student's mental health assessment, treatment, and contracts will be maintained by the Student Counseling office.

G. The student's progress will be monitored by Student Counseling or other appropriate counseling services and communicated to the appropriate Program Director and/or Division Assistant Dean to assess fitness to continue in the academic program.

H. The student will be required to provide written evidence that they have initiated treatment, appropriate follow through and readiness for return or continuance in the academic program.

I. Re-entry into the classroom/clinical setting following a student's absence for treatment, or continuation of an academic program during treatment, will be determined by the involved Program Director and Division Assistant Dean. A re-entry letter from the student's therapist or primary care provider indicating the student is ready to safely resume classroom and clinical activities will be required.

**J.** Relapse episodes will be treated similarly to initial incident. When it becomes evident that the student is in relapse or a reason exists to believe he/she is not complying with treatment protocols, he/she will be subject to further evaluation, treatment, and aftercare agreements. Behaviors which interfere with the student's ability to participate in the academic program may result in dismissal.

**K.** Responsibility for any costs of evaluation, treatment, or aftercare shall be borne by the student.

**L.** All Student Counseling records are kept confidential as required by law. Student Counseling records will not become part of a student's permanent academic record. Information from these records may be released only if the individual authorizes such release by signing a "Permission to Exchange Information" form, or as required by law. With a signed release, Student Counseling will provide progress reports to college administrators that are limited to the individual's compliance, an expert opinion regarding their progress in rehabilitation, and recommendations for continuing in school.

**Download Forms**

Student Assessment Agreement

Student Treatment Agreement